

APPLICATION FOR FORENSIC ALCOHOL LABORATORY LICENSE

Instructions:

- Type or print in ink. Attach additional pages if necessary.
- For regulations relating to this application, refer to the *California Code of Regulations, Title 17, Sections 1215-1222.2*.
- This application must include:
  - One completed Page B qualifications form (DHS 8672) for each person employed in forensic alcohol analysis;
  - A complete, detailed written description, including calibration and quality control procedures and a demonstration of accuracy and precision of each proposed method of forensic alcohol analysis used;
  - One completed Page C form (DHS 8673)
- Send in completed application and application fee to: **State Department of Health Services  
850 Marina Bay Parkway, G365  
Richmond, CA 94804-6403  
Attn: Food and Drug Laboratory Branch**

(NOTE: Call the Food and Drug Laboratory Branch for the exact amount of the fee, e.g., \$176 for Year 2004. A laboratory may be exempt from the fee as specified in Item 6 below.)

1. Name of laboratory (exactly as desired on license):

Street	City	Zip	Tel. No. ( )
Mailing Address (if different from above)	City	Zip	Tel. No. ( )

2. Type of ownership:

- ☐ Individual ☐ Partnership  
☐ Corporation ☐ Government Agency ☐ Other (Association, Company, etc.)

Full name of owner, one partner or administrator:

3. Exact name of corporation, government agency, or association owning laboratory:

4. Full name of person responsible for forensic alcohol analysis:

5. For each person who will be employed in forensic alcohol analysis, submit a completed Page B qualification form. List below the name and class of each person: FAS for Forensic Alcohol Supervisor, FAA for Forensic Alcohol Analyst, and FAAT for Forensic Alcohol Analyst Trainee.

NAME	CLASS	NAME	CLASS

6. Section 1217.8 requires that a laboratory operated by the state, city or other public organizations shall be exempt from the application fee requirement. If this laboratory is exempt from the application fee, describe the basis for exemption:

I declare under penalty of perjury that all statements on this application, including all attachments are true and correct; that I have read and understand the above listed sections of the California Code of Regulations; and that if a license is granted upon this application, the laboratory regulated by it will be conducted in accordance with the provisions of the aforementioned rules and regulations. I also certify that my connection with the above laboratory is bona fide, as shown, and that no subterfuge or mental reservation exists in connection with this application.

7. CERTIFICATION BY PERSON NAMED IN ITEM 2:

8. CERTIFICATION BY PERSON NAMED IN ITEM 2 :

Signature

Date

Signature

Date

9. Be sure that all the required elements are submitted. Check the items below to demonstrate that you have reviewed and found them to be included.
- ☐ Page A is completed and signed.
- ☐ One completed Page B qualifications form for each of the persons named in Item 5.
- ☐ There is at least one forensic alcohol supervisor .
- ☐ One completed Page C form.
- ☐ There is a complete, detailed written description for each forensic alcohol analysis method and/or breath alcohol analysis procedure.
- ☐ Application fee is enclosed, or the exemption claim (Item 6) is completed.